

MEETING OF THE CASE COMMITTEE HELD AT 15 FULTON STREET  
AT 11:30 A.M. TUESDAY, SEPT. 24, 1963.

Present:

Mr. Schein  
Mr. Osborne III  
Mr. Cooper  
Father Berry  
Mrs. Casey  
Miss Dickson

Absent:

Mr. Feuerstein  
Mr. Murphy  
Mrs. Rosenberg  
Miss Voigt  
Mr. Kilduff

Mr. Schein, committee chairman, read from the report of the field visit to Family Service Bureau by F.S.A.A. that part of the report which had specifically referred to the Casework Policies Committee of the Board. Copy of this section of the report was given to each member of the Case Committee present at the meeting.

In order to give a framework of reference against which to place the casework program of the agency, Miss Dickson from the staff presented a brief non-technical description of the history and philosophy of both social work and psychiatry, what the particular fields had in common, their special bodies of knowledge, the way in which these two have interacted in the 20th century. This was helpful in examining some of the basic questions raised in the report which have to do with the intensity of service and scope of service and the way in which the two are inter-related.

It was suggested during this meeting by Mr. Schein that a copy of the report of the field visit to Newark Family Service Bureau be mailed to each committee member and read carefully prior to our next meeting. It was also suggested that a copy of Range & Emphasis be sent to each member of the committee, as well as a copy of F.S.A.A. statement outlining the role of this committee.

The date for the next committee meeting will be Tuesday, October 8th, at 11 A.M. Notice of this meeting will be sent to each member in advance of the meeting.

It was also suggested that this committee, after study and consideration of those aspects of the F.S.A.A. report which pertain specifically to this committee, prepare a report to the total Board with the committee's recommendations and comments.

Miss Dickson, at the suggestion of Father Berry, agreed to prepare a brief outline of the material presented to the committee on this date for the report to the Board.

(Mrs) Peggy Casey

Miss Dickson, a member of the Casework Committee, outlined a comparison between psychiatrists and social workers. It is as follows:

#### Psychiatrists and social workers

- A. Work with the same kinds of people - clearest in mental hospitals where both are on a team.
- B. Have some training alike and some different.

Both are taught a thorough understanding of emotions, how people's personalities and characters develop, what makes them behave as they do.

Both are taught about emotional disturbance and abnormal development of the personality and what general forms this takes.

Social workers are given a much more thorough knowledge than psychiatrists of man in relation to other people, how people affect each other, what goes wrong in interpersonal relationships.

On other hand, psychiatrists are given a more thorough knowledge than social workers of what goes on deep inside a person, called intra-psychic processes.

Psychiatrists are taught about the human body, treatment of physical and neurological illnesses so that they work with both emotional problems and medical problems. How to use medicine as an aid in treating emotional problems.

Social workers are taught how to use the environment to help a client with his emotional problems.

- C. Techniques used are different but becoming more and more alike.

Traditional psychiatrists used drugs plus listening, concentrated wholly on getting down to the roots of what went wrong and rebuilding the personality from the ground up - ignored the environment, feeling if the inside person was changed enough he could handle any environment.

Traditional social workers concentrated wholly on environment, hoping if environment was changed enough the person himself would change to a happier way of living.

Both professions were forced by the partial failures of their methods of treatment to move more and more toward the approaches of the other profession. Thus psychiatrists started looking outside the patient to see what defeated the inner changes.